

MULTIPLE DEPEN.
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIM

SERIAL NO.
10/573292

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT					
	IND.		DEP.		IND.			IND.		DEP.		IND.		DEP.			
	1							51									
2								52									
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49								99									
50								100									
TOTAL IND.								2									
TOTAL DEP.								14									
TOTAL CLAIMS								16									